DECLARATION FOR PATENT APPLICATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FOLDING, DISPOSABLE TOOTHBRUSH

the specification of which (check one)	
X is attached hereto.	
_ was filed on as A	
and was amended on	(if applicable)
•	ed and understand the contents of the above identified lended by any amendment referred to above.
I acknowledge the duty to disclo patentability as defined in Title 37, Code	se all information known to me to be material to of Federal Regulations § 1.56.
	or, I hereby appoint the following attorney(s) and/or d transact all business in the Patent and Trademark
Lorraine S. Hirsch, Reg. No. 35,545	
Send correspondence to:	Direct telephone calls to:
Lorraine Hirsch, Esq.	Lorraine Hirsch
Law Offices of Lorraine Hirsch	(408) 358-1572
17491 Hicks Road	
Los Gatos, CA 95032	

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true, and further that

these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first inventor:

Marlene Ann Sexson

Inventor's signature: Marlene ann Alyson

Date: July 14, 2003

Residence:

236 McKee Road

Felton, CA 95018

Citizenship:

USA

Post Office Address:

236 McKee Road

Felton, CA 95018